



Seattle & King County
HEALTHY PEOPLE. HEALTHY COMMUNITIES.

Alonzo L. Plough, Ph.D., MPH, Director and Health Officer

POOL PLAN REVIEW APPLICATION

Please complete the information below and submit with a completed Plan Guide for Water Recreation Facilities checklist to the appropriate district office listed below.

CONSTRUCTION PERMIT (check one) Make checks payable to: SKCDPH

- ☐ New Pool Construction, 2,500 square feet or more, \$882.00 pre occupancy inspection fee, payable at the time of application, plus \$142.00 per hour for review time, payable at the time of final approval.
- ☐ New Pool Construction, less than 2,500 square feet, \$611.00 pre occupancy inspection fee, payable at the time of application, plus \$142.00 per hour for review time, payable at the time of final approval.
- ☐ Renovation (project over \$5,000), \$299.00 pre occupancy inspection fee, payable at the time of application, plus \$142.00 per hour for review time, payable at the time of final approval.
- ☐ Alteration (project under \$5,000), \$256.00 pre occupancy inspection fee, payable at the time of application, plus \$142.00 per hour for review time, payable at the time of final approval.
- ☐ Plan re-submittal, \$142.00 per hour for review time, payable at the time of final approval.

BRIEF DESCRIPTION OF PROPOSAL

PROJECT INFORMATION

Pool Facility Name _____

Pool Facility Site Address _____ City _____ State _____ Zip _____

Mailing Address (if different) _____ City _____ State _____ Zip _____

Name of Property Owner _____ Business Name _____

Contact Person _____ Phone (____) _____

Owner's Mailing Address _____ City _____ State _____ Zip _____

Architect/Engineer Name _____

Architect/Engineer Business Name _____ Phone (____) _____

Mailing Address _____ City _____ State _____ Zip _____

Pool Construction Company Contact _____

Pool Construction Company Business Name _____ Phone (____) _____

Address _____ City _____ State _____ Zip _____

Facility Type ☐ Pool ☐ Spa ☐ Wading Pool ☐ Spray Pool ☐ Water Park ☐ Temporary ☐ Other: _____

Operation Type ☐ Seasonal ☐ Year-Round ☐ Indoor ☐ Outdoor Proposed Months of Operation: _____

OFFICE USE ONLY

Permit Record ID (PR#) _____ SR# _____

Classification _____ DDES/DCLU _____

Date Submitted _____ Reviewer _____ Review Time _____ Approval Date _____

Action Taken: ☐ Approved ☐ Disapproved ☐ Corrections sent ☐ Pending ☐ Other _____

CONTACT LOG

Date _____ Discussion _____

If you have questions, please contact the plan reviewer below:

Eileen Hennessy

Telephone 206.296.4632

Fax 206.296.0188

Eileen.hennessy@metrokc.gov

Water Recreation and School Programs - Environmental Health Division

2124 4th Avenue, 4th Floor • Seattle, WA 98121

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City of Seattle
Gregory J. Nickels, Mayor



King County
Ron Sims, Executive